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APPLICANTS

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** CONTINUING DATA ***** *A-T* *****
 This application is a CIP of 09/654,133 09/01/2000 PAT 6,539,102

** FOREIGN APPLICATIONS ***** *None* *****

** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>A-T</i>	STATE OR COUNTRY MD	SHEETS DRAWING 6	TOTAL CLAIMS 70	INDEPENDENT CLAIMS 9
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Verified and Acknowledged
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TITLE
 REFERENCE DATABASE

FILING FEE RECEIVED 1400	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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